DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: OPAL HOUSE (0011300)

Address: N9633 HOWARD RD, WHITEWATER, WI 53190

License Status: REGULAR

Licensed/Certified/Registered 01/26/2006

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096299 End Date: 01/26/2006 Type: INITIAL Purpose: SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008895 Served 03/06/2006

		<u>Compliance</u>	
<u>Deficiencies Cited</u>	Subject Area	<u>Verified</u>	Corrected
88.05(3)(a)	HOME ENVIRONMENT	05/10/2006	Yes
88.05(3)(n)1	BED-CLEAN, GOOD CONDITION, PROPER SIZE	05/10/2006	Yes
88.06(1)(e)	INFORMATION TO DETERMINE SERVICES	05/10/2006	Yes
88.07(1)(c)	ACTIVITIES AND SERVICES	06/27/2006	Yes
88.07(2)(a)	SERVICES	06/15/2006	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 04/10/2006 Date Investigation Completed: 07/11/2006

Subject Area(s)ResultSOD #RESIDENT RIGHTSSUBSTANTIATED10011880